



PATIENT

Avery Prevette

SPECIES

Feline

BREED

Domestic shorthair

SEX

Male, neutered

AGE

13 Yrs.

WEIGHT

14.1 lbs.

INTERPRETED BY

Andrea Nicastro, DVM,
Diplomate ACVIM
(*Small Animal Internal
Medicine*)

**IMAGING
PERFORMED BY**

Diane McFadden,
RVT

HOSPITAL NAME

Animal Care Clinic of
Flanders

REFERRING VET

Dr. Halihan

INVOICE

12944

DATE

2/1/22

PRESENTING CLINICAL SIGNS

History: 1st FB surgery done after the first US on 12/6 (piece of packing tape at level of duodenal ligament); 2nd FB surgery performed a week ago. (piece of plastic packaging material at 3/4 of the way through the jejunum, about 4 cm from ICCJ) 5 days post started with severe regurgitation and anorexia. Abnormal PE/Chem/CBC/UA Results: K+ decr 3.0, Ca+ decr 1.18, lactate elevated, neutrophils 11,570

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately distended with anechoic urine. No masses, inflammatory changes or calculi are observed. Ureteral papillae and visualized portion of the proximal urethra, visible to a depth of 2 cm, are normal.

The left kidney is normal size (4.43 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with minimal loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis. Renal vasculature is normal.

The right kidney is normal size (4.87 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with minimal loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis. Renal vasculature is normal.

Adrenal Glands

The left adrenal gland is normal in size (1.04 cm length; 0.52 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

The right adrenal gland is normal in size (1.29 cm length; 0.47 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

Spleen

The spleen is normal in size (0.83 cm in width at the level of the hilus) with a normal capsular contour. There is appropriate echogenicity and echotexture. No focal lesions are observed. Splenic vasculature is normal.

Liver

The liver is subjectively normal in size with normal contours and structure. There is appropriate echogenicity and echotexture. No overt structural evidence of inflammatory, infiltrative or regenerative pathology is evident. Vascular and biliary tracts are of normal volume with no evidence of congestion. No pathological hepatic lymphadenopathy observed. The portal vein: caudal vena cava ratio is approximately 1:1. The gall bladder lumen is moderately distended. The wall is normal in thickness. A bi-lobed configuration is present. Luminal contents are anechoic. The cystic and common bile ducts are normal.

Gastrointestinal

The gastric lumen is severely distended with fluid and chyme and is hypomotile. The gastric wall and pylorus are normal in thickness with a normal layering pattern. The pyloric outflow tract is patent. The



PATIENT

Avery Prevete

small intestinal lumen is diffusely fluid distended and hypomotile (moderate). The small intestinal wall thickness is normal with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The colonic wall is normal. The lumen of the descending colon contains shadowing fecal material.

SPECIES

Feline

Pancreas

A portion of the pancreas is obscured by the severe gastric distention. In the visible portion of the right limb, the pancreas appears enlarged with minimal deviation from the normal peripheral contours. The parenchyma is hypochoic relative to surrounding omental fat and subtly mottled in appearance. No distinct focal lesions are observed. The pancreatic duct is mildly dilated (0.25 cm in diameter). The mesentery effacing the serosal surface is hyperechoic.

BREED

Domestic shorthair

Free Abdomen

There is no obvious evidence of free fluid. A few prominent mesenteric lymph nodes are visualized, the largest measuring 1.17 cm in length.

SEX

Male, neutered

AGE

13 Yrs.

ULTRASONOGRAPHIC FINDINGS

WEIGHT

14.1 lbs.

- The pancreatic changes are most consistent with pancreatitis, either acute or chronic/active. Age-related remodeling +/- fibrosis is also likely present.
- Regional peritonitis is present.
- The gastrointestinal changes are most consistent with diffuse ileus. However, a foreign body/obstruction cannot be completely excluded, as it is difficult to evaluate all portions of bowel due to the severe distention. The lymph node changes are most consistent with reactive lymphadenitis or lymphoid hyperplasia.

INTERPRETED BY

Andrea Nicastro, DVM,
Diplomate ACVIM
(*Small Animal Internal
Medicine*)

*The severe regurgitation may be secondary to esophagitis and/or gastrointestinal hypomotility/reflux.

IMAGING PERFORMED BY

Diane McFadden,
RVT

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

Animal Care Clinic of
Flanders

- Three-view thoracic radiographs are recommended to assess the esophagus and to evaluate for possible aspiration pneumonia.
- Supportive care for pancreatitis is recommended including IV fluid therapy, gastric protectants, antiemetics, pain medication as needed, +/- fresh frozen plasma.
- Consider a recheck ultrasound in 12-24 hours to reevaluate the bowel.

REFERRING VET

Dr. Halihan

INVOICE

12944

DATE

2/1/22



PATIENT

Avery Prevete

SPECIES

Feline

BREED

Domestic shorthair

SEX

Male, neutered

AGE

13 Yrs.

WEIGHT

14.1 lbs.

INTERPRETED BY

Andrea Nicastro, DVM,
Diplomate ACVIM
(Small Animal Internal
Medicine)

**IMAGING
PERFORMED BY**

Diane McFadden,
RVT

HOSPITAL NAME

Animal Care Clinic of
Flanders

REFERRING VET

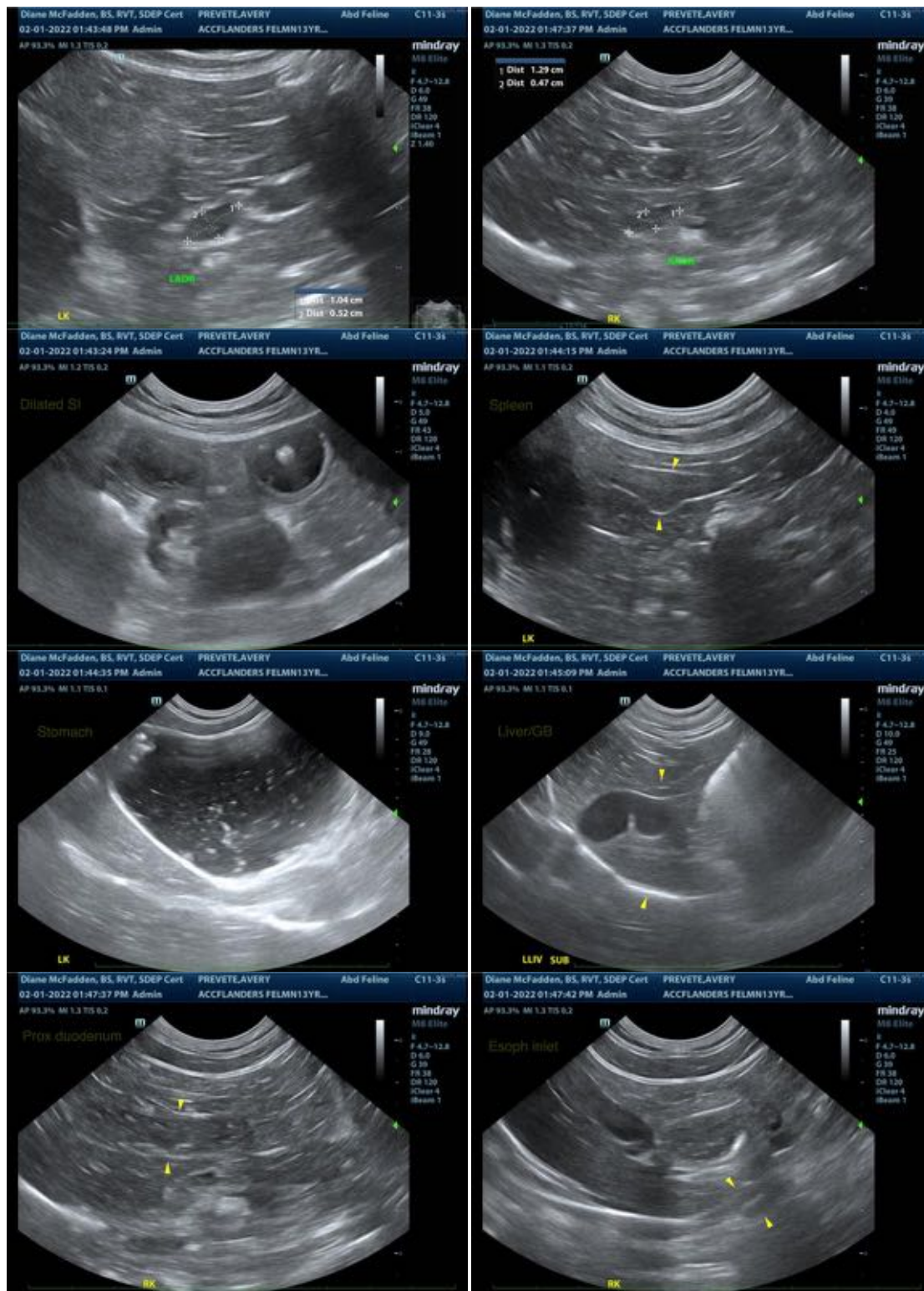
Dr. Halihan

INVOICE

12944

DATE

2/1/22





PATIENT

Avery Prevet

SPECIES

Feline

BREED

Domestic shorthair

SEX

Male, neutered

AGE

13 Yrs.

WEIGHT

14.1 lbs.

INTERPRETED BY

Andrea Nicastro, DVM,
Diplomate ACVIM
(*Small Animal Internal
Medicine*)

IMAGING PERFORMED BY

Diane McFadden,
RVT

HOSPITAL NAME

Animal Care Clinic of
Flanders

REFERRING VET

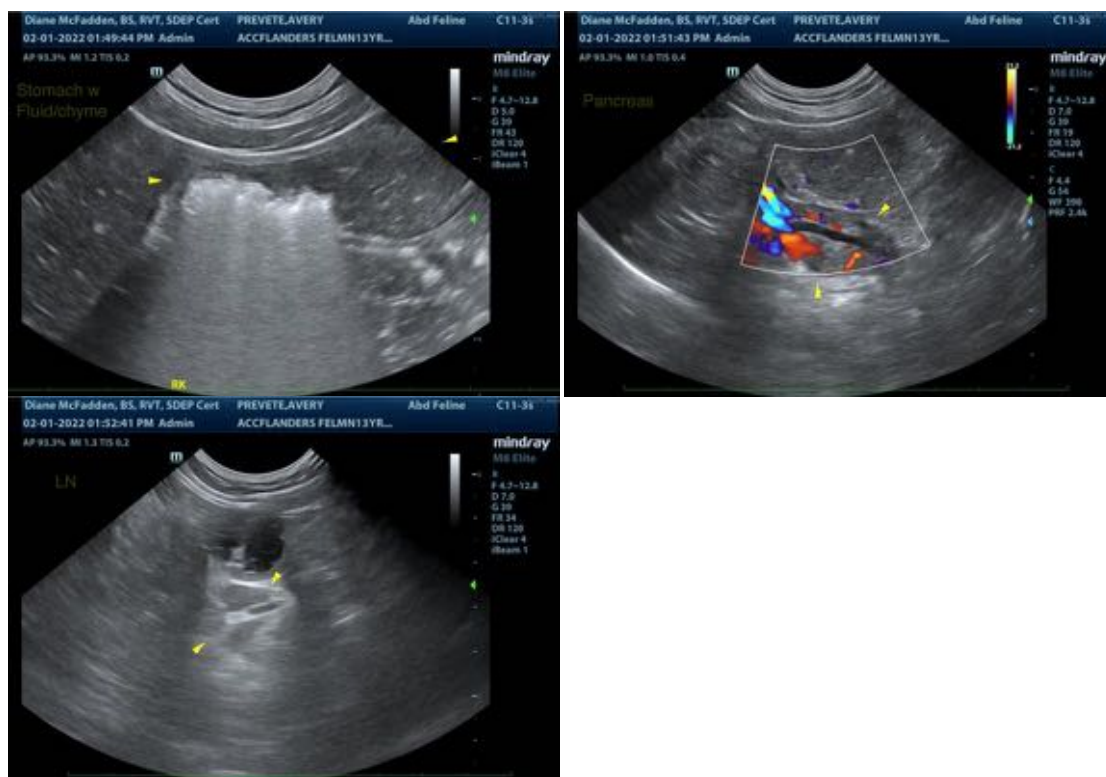
Dr. Halihan

INVOICE

12944

DATE

2/1/22



The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

Andrea Nicastro, DVM, Diplomate ACVIM (*Small Animal Internal Medicine*)

andrea_nicastro2@hotmail.com